



To indicate that a child is an ancestor of the person submitting the sheet, place an "X" behind the number pertaining to that child.

<b>HUSBAND</b> <i>Reed RASBAND</i>					Husband		<i>Reed</i>		<i>RASBAND</i>		
Born _____ Place _____					Wife		<i>Teenie</i>		<i>MONTGOMERY</i>		
Chr. _____ Place _____					Ward		1.		NAME & ADDRESS OF PERSON SUBMITTING		
Marr. _____ Place _____					Examiners:		2.				
Died _____ Place _____					Stake or Mission				RELATION OF ABOVE TO HUSBAND		
Bur. _____ Place _____									FOUR GENERATION SHEETS FOR FILING OF		
HUSBAND'S FATHER _____ HUSBAND'S MOTHER _____									YES <input type="checkbox"/>		
HUSBAND'S OTHER WIVES _____									DATE SUBMITTED TO GENEALOGICAL SOC		
<b>WIFE</b> <i>Teenie MONTGOMERY (LPN)</i>											
Born _____ Place _____											
Chr. _____ Place _____											
Died _____ Place _____											
Bur. _____ Place _____											
WIFE'S FATHER _____ WIFE'S MOTHER _____											
WIFE'S OTHER HUSBANDS _____											
SEX	<b>CHILDREN</b>		<b>WHEN BORN</b>		<b>WHERE BORN</b>			<b>DATE OF FIRST MARRIAGE</b>		<b>WHEN DIED</b>	
M	List each child (whether living or dead) in order of birth		DAY MONTH YEAR		TOWN COUNTY STATE OR COUNTRY			TO WHOM		DAY MONTH YEAR	
F	Given Names SURNAME										
1											
2											
3											
4											
5											
6											
7											
8											
9											
10											
11											
SOURCES OF INFORMATION					OTHER						
<i>1, Reed Rasband 332 W Center Heber 211 84032</i>											
										NECESSARY EXPLANATIONS	

